

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,257	4,462	18,024	11,399	3,372	2,591	8,352	4,530	1,131	16,604	1,867	9,673	6,868	2,239	20,646
	140	78	131	96	60	63	118	71	33	126	41	97	89	52	124
Beneficiaries as a Percent of Column Total															
Access to Care															
Usual Source of Care															
None ³	6.53	7.75	7.02	5.63	5.24	8.36	8.34	6.76	5.77	7.75	6.90	5.89	4.89	4.98	5.56
	0.30	0.70	0.43	0.37	0.54	0.88	0.64	0.61	0.91	0.47	0.90	0.59	0.40	0.61	0.32
Doctor's office	71.36	63.73	70.28	74.30	77.96	60.94	67.15	71.40	77.70	67.98	67.61	72.95	76.19	78.09	74.06
	1.05	1.52	1.16	1.23	1.33	1.84	1.41	1.28	2.00	1.18	1.86	1.31	1.40	1.35	1.14
Doctor's clinic	8.32	8.96	8.55	8.14	6.77	8.69	8.69	7.98	6.50	8.36	9.34	8.42	8.25	6.90	8.29
	0.91	1.08	0.88	1.11	1.08	1.20	0.93	1.07	1.53	0.93	1.31	0.96	1.21	1.00	0.95
HMO ⁴	7.00	3.99	8.06	6.92	5.41	3.89	7.95	7.16	5.82	6.96	4.12	8.15	6.76	5.21	7.02
	0.36	0.56	0.48	0.44	0.49	0.74	0.61	0.59	0.80	0.48	0.72	0.61	0.58	0.54	0.41
Hospital OPD/ER ⁵	2.78	6.08	2.59	2.02	1.94	5.75	2.44	2.10	1.38	2.81	6.53	2.71	1.96	2.21	2.76
	0.15	0.52	0.20	0.19	0.33	0.76	0.28	0.36	0.42	0.23	0.78	0.30	0.27	0.44	0.22
Other clinic/health center	4.01	9.49	3.51	3.00	2.69	12.38	5.42	4.60	2.84	6.14	5.50	1.87	1.95	2.61	2.30
	0.22	0.79	0.33	0.23	0.37	1.34	0.55	0.42	0.69	0.39	0.66	0.29	0.24	0.46	0.19
Difficulty Obtaining Care															
Yes	3.63	10.06	3.03	2.50	2.18	9.88	2.72	1.92	1.37	3.52	10.30	3.31	2.88	2.60	3.72
	0.17	0.65	0.25	0.20	0.36	0.85	0.32	0.29	0.43	0.25	1.09	0.33	0.28	0.48	0.22
No	96.37	89.94	96.97	97.50	97.82	90.12	97.28	98.08	98.63	96.48	89.70	96.69	97.12	97.40	96.28
	0.17	0.65	0.25	0.20	0.36	0.85	0.32	0.29	0.43	0.25	1.09	0.33	0.28	0.48	0.22
Delayed Care Due to Cost															
Yes	7.59	23.26	6.25	4.79	3.43	22.64	4.99	4.12	2.45	7.33	24.13	7.35	5.23	3.93	7.79
	0.27	1.26	0.34	0.27	0.46	1.50	0.45	0.43	0.55	0.38	1.80	0.49	0.39	0.57	0.32
No	92.41	76.74	93.75	95.21	96.57	77.36	95.01	95.88	97.55	92.67	75.87	92.65	94.77	96.07	92.21
	0.27	1.26	0.34	0.27	0.46	1.50	0.45	0.43	0.55	0.38	1.80	0.49	0.39	0.57	0.32

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,257	4,462	18,024	11,399	3,372	2,591	8,352	4,530	1,131	16,604	1,867	9,673	6,868	2,239	20,646
	<i>140</i>	<i>78</i>	<i>131</i>	<i>96</i>	<i>60</i>	<i>63</i>	<i>118</i>	<i>71</i>	<i>33</i>	<i>126</i>	<i>41</i>	<i>97</i>	<i>89</i>	<i>52</i>	<i>124</i>
Beneficiaries as a Percent of Column Total															
Continuity of Care															
Length of Association with Usual Source of Care															
No usual source ³	6.55	7.80	7.03	5.64	5.31	8.42	8.36	6.76	5.85	7.78	6.93	5.89	4.91	5.05	5.58
	<i>0.30</i>	<i>0.70</i>	<i>0.43</i>	<i>0.37</i>	<i>0.55</i>	<i>0.89</i>	<i>0.64</i>	<i>0.61</i>	<i>0.92</i>	<i>0.46</i>	<i>0.90</i>	<i>0.60</i>	<i>0.40</i>	<i>0.61</i>	<i>0.32</i>
Less than 1 year	9.74	10.16	10.13	8.96	9.68	10.97	9.83	8.38	10.60	9.67	9.04	10.38	9.33	9.23	9.80
	<i>0.35</i>	<i>0.78</i>	<i>0.60</i>	<i>0.47</i>	<i>0.66</i>	<i>1.08</i>	<i>0.70</i>	<i>0.58</i>	<i>1.21</i>	<i>0.41</i>	<i>0.99</i>	<i>0.78</i>	<i>0.59</i>	<i>0.81</i>	<i>0.47</i>
1 to less than 3 years	18.60	22.85	18.74	17.11	17.09	23.20	17.54	16.79	15.79	18.12	22.36	19.76	17.33	17.72	18.99
	<i>0.39</i>	<i>1.22</i>	<i>0.53</i>	<i>0.59</i>	<i>0.83</i>	<i>1.48</i>	<i>0.76</i>	<i>0.87</i>	<i>1.45</i>	<i>0.55</i>	<i>1.67</i>	<i>0.82</i>	<i>0.72</i>	<i>0.96</i>	<i>0.49</i>
3 to less than 5 years	16.02	18.39	15.84	15.81	14.42	17.71	16.05	14.98	13.81	15.88	19.33	15.66	16.35	14.71	16.13
	<i>0.33</i>	<i>0.93</i>	<i>0.52</i>	<i>0.51</i>	<i>0.69</i>	<i>1.29</i>	<i>0.70</i>	<i>0.80</i>	<i>1.43</i>	<i>0.51</i>	<i>1.44</i>	<i>0.69</i>	<i>0.69</i>	<i>0.81</i>	<i>0.38</i>
5 years or more	49.09	40.80	48.26	52.48	53.50	39.69	48.21	53.09	53.95	48.55	42.34	48.30	52.08	53.28	49.51
	<i>0.52</i>	<i>1.24</i>	<i>0.78</i>	<i>0.74</i>	<i>1.13</i>	<i>1.65</i>	<i>1.14</i>	<i>1.08</i>	<i>2.03</i>	<i>0.77</i>	<i>1.67</i>	<i>0.90</i>	<i>0.89</i>	<i>1.37</i>	<i>0.59</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 4 HMO stands for Health Maintenance Organization.
- 5 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,257	4,462	18,024	11,399	3,372	2,591	8,352	4,530	1,131	16,604	1,867	9,673	6,868	2,239	20,646
	140	78	131	96	60	63	118	71	33	126	41	97	89	52	124
Beneficiaries as a Percent of Column Total³															
Quality of Care															
General Care															
Very Satisfied ⁴	30.95	23.43	33.85	30.82	25.71	22.90	33.56	32.22	26.81	31.07	24.16	34.10	29.91	25.15	30.85
	0.46	1.00	0.65	0.70	1.00	1.39	0.99	1.09	1.64	0.69	1.60	0.91	0.83	1.23	0.63
(Very) Unsatisfied ⁵	3.61	6.42	3.23	3.07	3.74	5.80	2.81	2.90	3.49	3.35	7.29	3.59	3.18	3.86	3.82
	0.18	0.59	0.25	0.28	0.46	0.73	0.35	0.43	0.82	0.29	0.88	0.38	0.30	0.53	0.23
Follow-up Care															
Very Satisfied ⁴	18.35	16.16	19.94	18.04	13.39	16.11	20.43	18.40	14.63	18.84	16.24	19.51	17.80	12.79	17.96
	0.44	0.92	0.63	0.63	0.72	1.41	0.95	0.93	1.34	0.65	1.33	0.79	0.72	0.86	0.50
(Very) Unsatisfied ⁵	3.01	5.86	2.51	2.65	3.09	5.75	2.23	2.36	3.38	2.89	6.01	2.76	2.83	2.94	3.10
	0.16	0.60	0.19	0.23	0.42	0.77	0.27	0.34	0.75	0.26	0.84	0.30	0.27	0.49	0.18
Access/Coordination of Care															
Availability															
Very Satisfied ⁴	11.76	11.24	12.25	11.15	11.82	10.59	13.79	11.39	12.85	12.58	12.14	10.93	10.99	11.32	11.10
	0.40	0.79	0.58	0.48	0.72	1.11	0.85	0.72	1.49	0.55	1.35	0.62	0.57	0.82	0.43
(Very) Unsatisfied ⁵	3.06	6.80	2.54	2.52	2.70	6.63	2.60	2.65	2.36	3.23	7.04	2.48	2.44	2.86	2.92
	0.18	0.70	0.23	0.22	0.35	0.94	0.26	0.31	0.61	0.22	0.96	0.31	0.26	0.44	0.22
Ease of Access to Doctor															
Very Satisfied ⁴	19.62	13.05	22.89	18.51	14.18	13.34	23.48	19.33	16.12	20.29	12.65	22.38	17.98	13.24	19.08
	0.48	0.84	0.66	0.65	0.73	1.30	0.93	0.97	1.46	0.64	1.17	0.92	0.75	0.84	0.61
(Very) Unsatisfied ⁵	5.37	11.05	3.76	5.23	7.08	10.36	3.22	4.20	5.37	4.74	12.02	4.23	5.92	7.91	5.88
	0.23	0.83	0.33	0.35	0.65	1.05	0.42	0.45	0.87	0.34	1.30	0.47	0.46	0.81	0.30
Can Obtain Care in Same Location															
Very Satisfied ⁴	15.00	13.48	16.27	14.66	11.04	13.13	16.54	14.42	11.06	15.09	13.96	16.04	14.82	11.03	14.93
	0.47	0.95	0.60	0.59	0.76	1.24	0.84	0.71	1.18	0.61	1.46	0.77	0.71	0.95	0.54
(Very) Unsatisfied ⁵	4.66	9.64	3.99	3.89	4.24	9.25	3.88	3.77	4.17	4.72	10.18	4.08	3.97	4.27	4.62
	0.23	0.81	0.29	0.29	0.46	0.96	0.43	0.42	0.97	0.32	1.19	0.41	0.42	0.58	0.30

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,257	4,462	18,024	11,399	3,372	2,591	8,352	4,530	1,131	16,604	1,867	9,673	6,868	2,239	20,646
	<i>140</i>	<i>78</i>	<i>131</i>	<i>96</i>	<i>60</i>	<i>63</i>	<i>118</i>	<i>71</i>	<i>33</i>	<i>126</i>	<i>41</i>	<i>97</i>	<i>89</i>	<i>52</i>	<i>124</i>
Beneficiaries as a Percent of Column Total³															
Relationship with Primary Doctor															
Information from Doctor															
Very Satisfied ⁴	19.08	15.25	20.97	18.35	16.28	15.16	20.86	19.26	16.28	19.24	15.38	21.05	17.76	16.28	18.95
	<i>0.43</i>	<i>0.94</i>	<i>0.61</i>	<i>0.58</i>	<i>0.84</i>	<i>1.34</i>	<i>0.89</i>	<i>0.88</i>	<i>1.49</i>	<i>0.63</i>	<i>1.47</i>	<i>0.87</i>	<i>0.73</i>	<i>1.07</i>	<i>0.52</i>
(Very) Unsatisfied ⁵	5.24	8.87	4.61	4.81	5.33	8.72	4.46	4.43	6.06	5.22	9.07	4.74	5.07	4.97	5.27
	<i>0.22</i>	<i>0.77</i>	<i>0.29</i>	<i>0.34</i>	<i>0.58</i>	<i>1.01</i>	<i>0.41</i>	<i>0.43</i>	<i>1.12</i>	<i>0.32</i>	<i>0.99</i>	<i>0.43</i>	<i>0.41</i>	<i>0.68</i>	<i>0.29</i>
Doctor's Concern for Overall Health															
Very Satisfied ⁴	20.06	17.34	21.91	19.47	15.34	17.37	21.61	19.91	15.87	20.12	17.30	22.16	19.19	15.08	20.01
	<i>0.44</i>	<i>1.05</i>	<i>0.59</i>	<i>0.63</i>	<i>0.90</i>	<i>1.52</i>	<i>0.86</i>	<i>0.88</i>	<i>1.35</i>	<i>0.59</i>	<i>1.50</i>	<i>0.80</i>	<i>0.78</i>	<i>1.03</i>	<i>0.56</i>
(Very) Unsatisfied ⁵	4.77	7.38	4.45	4.38	4.34	7.06	4.09	3.94	5.61	4.61	7.82	4.75	4.67	3.72	4.90
	<i>0.24</i>	<i>0.69</i>	<i>0.31</i>	<i>0.31</i>	<i>0.48</i>	<i>0.95</i>	<i>0.41</i>	<i>0.47</i>	<i>0.95</i>	<i>0.37</i>	<i>0.96</i>	<i>0.43</i>	<i>0.37</i>	<i>0.59</i>	<i>0.27</i>
Cost															
Very Satisfied ⁴	17.00	12.86	18.92	16.62	13.27	12.12	19.50	18.23	15.05	17.72	13.87	18.42	15.55	12.41	16.43
	<i>0.44</i>	<i>0.97</i>	<i>0.66</i>	<i>0.53</i>	<i>0.77</i>	<i>1.29</i>	<i>1.00</i>	<i>0.86</i>	<i>1.35</i>	<i>0.65</i>	<i>1.34</i>	<i>0.75</i>	<i>0.58</i>	<i>0.87</i>	<i>0.51</i>
(Very) Unsatisfied ⁵	11.89	21.00	11.26	10.11	9.13	20.93	9.77	8.52	9.17	11.13	21.09	12.53	11.16	9.11	12.50
	<i>0.35</i>	<i>0.96</i>	<i>0.51</i>	<i>0.39</i>	<i>0.73</i>	<i>1.32</i>	<i>0.62</i>	<i>0.60</i>	<i>1.14</i>	<i>0.42</i>	<i>1.28</i>	<i>0.68</i>	<i>0.58</i>	<i>0.85</i>	<i>0.45</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 Column percentages do not sum to 100 percent because the responses of "satisfied" and "no experience" are excluded from the table for all satisfaction variables.
- 4 Beneficiaries who's response to the question was 'very satisfied'
- 5 Beneficiaries who's response to the question was 'unsatisfied' or 'very unsatisfied'

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,257	3,044	14,948	9,734	2,914	30,640	790	1,368	832	237	3,227	496	1,203	595	160	2,454
	140	77	153	96	58	205	36	46	34	19	69	43	89	51	19	169
Beneficiaries as a Percent of Column Total																
Access to Care																
Usual Source of Care																
None ⁴	6.53	7.35	6.59	5.23	4.94	6.09	7.38	9.88	6.05	5.37	7.97	7.29	8.49	11.89	10.11	9.16
	0.30	0.80	0.48	0.37	0.60	0.32	1.05	1.39	1.02	1.44	0.66	1.98	1.44	2.19	4.06	1.14
Doctor's office	71.36	67.69	72.74	76.09	79.21	73.87	55.28	58.45	65.90	70.11	60.38	55.22	57.70	59.40	66.00	58.11
	1.05	1.87	1.27	1.32	1.46	1.17	2.57	2.51	2.30	3.74	1.55	3.69	2.29	3.09	6.90	1.84
Doctor's clinic	8.32	9.30	9.27	8.62	7.28	8.89	8.80	5.48	5.88	4.13	6.30	6.50	4.01	3.43	2.22	4.27
	0.91	1.30	1.01	1.24	1.26	1.04	1.76	1.08	1.08	1.90	0.85	1.61	1.20	1.30	1.14	0.87
HMO ⁵	7.00	4.02	7.11	6.46	5.34	6.44	3.33	7.93	4.81	4.61	5.77	4.85	16.45	16.19	8.91	13.56
	0.36	0.60	0.44	0.45	0.52	0.34	1.09	1.10	1.04	1.63	0.55	2.23	2.27	2.32	3.21	1.90
Hospital OPD/ER ⁶	2.78	2.95	1.37	1.17	1.01	1.43	13.18	9.90	9.78	11.25	10.78	15.24	9.09	5.56	3.47	9.15
	0.15	0.37	0.18	0.17	0.25	0.12	1.57	1.33	1.58	2.97	0.90	2.84	1.23	1.20	1.80	1.03
Other clinic/ health center	4.01	8.69	2.91	2.43	2.22	3.28	12.03	8.35	7.57	4.53	8.79	10.90	4.25	3.53	9.29	5.74
	0.22	1.03	0.31	0.22	0.35	0.21	1.63	1.19	1.39	1.63	0.83	1.67	1.18	0.72	2.80	0.72
Difficulty Obtaining Care																
Yes	3.63	10.41	2.98	2.13	1.97	3.35	9.46	3.29	5.45	3.29	5.35	9.69	2.68	4.14	4.05	4.53
	0.17	0.82	0.26	0.22	0.37	0.17	1.79	0.76	1.26	1.54	0.62	1.85	0.76	1.23	1.74	0.62
No	96.37	89.59	97.02	97.87	98.03	96.65	90.54	96.71	94.55	96.71	94.65	90.31	97.32	95.86	95.95	95.47
	0.17	0.82	0.26	0.22	0.37	0.17	1.79	0.76	1.26	1.54	0.62	1.85	0.76	1.23	1.74	0.62
Delayed Care Due to Cost																
Yes	7.59	23.76	5.74	4.41	3.17	6.86	22.60	11.07	7.40	4.44	12.46	19.97	7.26	7.42	2.47	9.55
	0.27	1.50	0.42	0.27	0.50	0.30	2.67	1.60	1.27	1.69	0.97	3.08	1.41	1.71	1.31	0.94
No	92.41	76.24	94.26	95.59	96.83	93.14	77.40	88.93	92.60	95.56	87.54	80.03	92.74	92.58	97.53	90.45
	0.27	1.50	0.42	0.27	0.50	0.30	2.67	1.60	1.27	1.69	0.97	3.08	1.41	1.71	1.31	0.94

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,257	3,044	14,948	9,734	2,914	30,640	790	1,368	832	237	3,227	496	1,203	595	160	2,454
	<i>140</i>	<i>77</i>	<i>153</i>	<i>96</i>	<i>58</i>	<i>205</i>	<i>36</i>	<i>46</i>	<i>34</i>	<i>19</i>	<i>69</i>	<i>43</i>	<i>89</i>	<i>51</i>	<i>19</i>	<i>169</i>

Beneficiaries as a Percent of Column Total

Continuity of Care																
Length of Association with Usual Source of Care																
No usual source ⁴	6.55	7.40	6.60	5.24	5.02	6.11	7.39	9.82	6.08	5.41	7.97	7.40	8.54	11.84	10.03	9.20
	<i>0.30</i>	<i>0.80</i>	<i>0.48</i>	<i>0.37</i>	<i>0.61</i>	<i>0.32</i>	<i>1.07</i>	<i>1.38</i>	<i>1.02</i>	<i>1.46</i>	<i>0.66</i>	<i>2.00</i>	<i>1.44</i>	<i>2.18</i>	<i>3.82</i>	<i>1.14</i>
Less than 1 year	9.74	10.44	9.81	8.72	9.24	9.48	12.11	9.45	11.12	14.70	10.90	7.59	11.09	12.11	11.73	10.67
	<i>0.35</i>	<i>0.96</i>	<i>0.67</i>	<i>0.51</i>	<i>0.72</i>	<i>0.40</i>	<i>1.82</i>	<i>1.06</i>	<i>1.53</i>	<i>3.25</i>	<i>0.75</i>	<i>1.51</i>	<i>1.70</i>	<i>1.68</i>	<i>3.36</i>	<i>0.97</i>
1 to less than 3 years	18.60	22.00	17.57	16.76	16.40	17.65	21.68	21.54	15.69	20.08	20.00	30.59	26.03	22.10	23.54	25.85
	<i>0.39</i>	<i>1.41</i>	<i>0.61</i>	<i>0.63</i>	<i>0.87</i>	<i>0.41</i>	<i>2.16</i>	<i>1.63</i>	<i>1.98</i>	<i>3.26</i>	<i>0.95</i>	<i>4.38</i>	<i>2.44</i>	<i>2.38</i>	<i>4.16</i>	<i>1.84</i>
3 to less than 5 years	16.02	18.63	16.07	15.54	15.00	16.06	17.60	13.64	17.73	12.66	15.57	18.64	17.56	15.31	7.79	16.63
	<i>0.33</i>	<i>1.19</i>	<i>0.57</i>	<i>0.56</i>	<i>0.73</i>	<i>0.36</i>	<i>2.07</i>	<i>1.54</i>	<i>1.85</i>	<i>2.42</i>	<i>1.11</i>	<i>2.72</i>	<i>1.56</i>	<i>2.05</i>	<i>2.74</i>	<i>0.96</i>
5 years or more	49.09	41.54	49.95	53.73	54.34	50.69	41.22	45.55	49.38	47.15	45.56	35.79	36.77	38.64	46.90	37.65
	<i>0.52</i>	<i>1.57</i>	<i>0.85</i>	<i>0.81</i>	<i>1.23</i>	<i>0.56</i>	<i>2.75</i>	<i>2.33</i>	<i>2.46</i>	<i>3.83</i>	<i>1.28</i>	<i>3.88</i>	<i>2.27</i>	<i>3.32</i>	<i>5.52</i>	<i>1.72</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 Total includes persons of other race/ethnicity and persons who did not report their race/ethnicity.
- 4 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 5 HMO stands for Health Maintenance Organization.
- 6 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,257	3,044	14,948	9,734	2,914	30,640	790	1,368	832	237	3,227	496	1,203	595	160	2,454
	140	77	153	96	58	205	36	46	34	19	69	43	89	51	19	169
Beneficiaries as a Percent of Column Total⁴																
Quality of Care																
General Care																
Very Satisfied ⁵	30.95	24.13	36.73	32.69	26.75	33.26	22.97	19.17	19.06	19.53	20.10	19.03	20.78	20.53	21.57	20.42
	0.46	1.21	0.77	0.75	1.11	0.55	2.73	1.81	2.44	3.29	1.31	2.77	2.09	2.39	3.35	1.27
(Very) Unsatisfied ⁶	3.61	6.88	3.15	3.02	3.87	3.55	4.07	3.93	1.84	1.44	3.24	8.02	4.09	4.15	5.04	4.96
	0.18	0.71	0.28	0.30	0.50	0.19	0.72	1.01	0.62	0.96	0.50	1.95	0.82	1.48	2.53	0.91
Follow-up Care																
Very Satisfied ⁵	18.35	17.04	21.16	18.86	13.28	19.32	16.17	10.93	10.51	11.62	12.18	11.52	16.86	16.73	19.30	15.88
	0.44	1.03	0.72	0.67	0.82	0.51	2.76	1.28	1.80	2.59	1.11	2.80	1.87	2.14	2.70	1.21
(Very) Unsatisfied ⁶	3.01	6.23	2.30	2.60	3.02	2.85	2.96	3.86	2.15	2.83	3.14	7.93	2.93	3.64	5.70	4.29
	0.16	0.71	0.22	0.24	0.45	0.17	0.84	0.78	0.73	1.39	0.46	2.03	0.76	1.25	2.88	0.76
Access/Coordination of Care																
Availability																
Very Satisfied ⁵	11.76	11.74	12.85	11.40	12.05	12.21	9.67	5.80	8.20	7.93	7.52	11.78	14.32	12.18	15.36	13.35
	0.40	0.97	0.70	0.51	0.79	0.47	1.47	0.99	1.63	2.24	0.66	1.83	1.60	1.95	3.50	1.05
(Very) Unsatisfied ⁶	3.06	7.09	2.66	2.42	2.70	3.03	6.36	1.72	3.04	2.82	3.29	5.49	1.69	3.11	2.28	2.84
	0.18	0.94	0.25	0.23	0.38	0.21	1.40	0.62	0.90	1.39	0.47	1.66	0.47	0.97	1.81	0.49
Ease of Access to Doctor																
Very Satisfied ⁵	19.62	13.64	24.26	19.60	14.74	20.86	12.42	14.32	9.59	7.15	12.14	10.78	17.78	12.96	15.36	15.04
	0.48	0.99	0.70	0.73	0.80	0.52	2.52	1.62	1.38	1.83	0.94	1.48	2.18	1.93	2.97	1.41
(Very) Unsatisfied ⁶	5.37	10.24	3.46	4.69	6.83	4.83	12.67	4.62	8.50	8.89	7.91	11.75	7.01	8.32	10.56	8.50
	0.23	0.89	0.35	0.36	0.70	0.23	2.11	0.79	1.33	2.08	0.80	1.96	1.62	1.65	3.05	0.92
Can Obtain Care in Same Location																
Very Satisfied ⁵	15.00	13.86	16.90	14.98	11.05	15.47	12.96	12.58	11.24	9.44	12.12	12.34	15.94	14.84	12.97	14.76
	0.47	1.09	0.65	0.66	0.88	0.51	2.54	1.52	1.61	2.41	1.09	2.35	2.06	2.06	1.93	1.41
(Very) Unsatisfied ⁶	4.66	10.69	3.87	3.83	4.29	4.58	6.17	3.70	2.63	3.23	4.01	9.30	5.29	5.42	5.35	6.15
	0.23	1.08	0.33	0.31	0.48	0.26	1.08	0.99	0.91	1.35	0.50	2.00	1.44	1.19	1.95	0.72

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,257	3,044	14,948	9,734	2,914	30,640	790	1,368	832	237	3,227	496	1,203	595	160	2,454
	<i>140</i>	<i>77</i>	<i>153</i>	<i>96</i>	<i>58</i>	<i>205</i>	<i>36</i>	<i>46</i>	<i>34</i>	<i>19</i>	<i>69</i>	<i>43</i>	<i>89</i>	<i>51</i>	<i>19</i>	<i>169</i>
Beneficiaries as a Percent of Column Total⁴																
Relationship with Primary Doctor																
Information from Doctor																
Very Satisfied ⁵	19.08	15.42	22.26	18.77	16.54	19.95	15.92	11.52	14.53	10.01	13.27	13.48	16.55	18.12	20.77	16.57
	<i>0.43</i>	<i>0.89</i>	<i>0.70</i>	<i>0.63</i>	<i>0.96</i>	<i>0.46</i>	<i>2.94</i>	<i>1.61</i>	<i>2.34</i>	<i>2.58</i>	<i>1.34</i>	<i>2.79</i>	<i>1.70</i>	<i>1.89</i>	<i>3.36</i>	<i>1.11</i>
(Very) Unsatisfied ⁶	5.24	9.52	4.48	5.01	5.52	5.24	6.34	4.22	2.77	3.29	4.31	8.28	5.60	3.50	5.04	5.60
	<i>0.22</i>	<i>0.97</i>	<i>0.28</i>	<i>0.37</i>	<i>0.63</i>	<i>0.23</i>	<i>1.23</i>	<i>0.91</i>	<i>0.85</i>	<i>1.50</i>	<i>0.53</i>	<i>1.88</i>	<i>1.26</i>	<i>1.08</i>	<i>2.63</i>	<i>0.85</i>
Doctor's Concern for Overall Health																
Very Satisfied ⁵	20.06	18.50	23.27	20.18	15.51	21.12	14.56	14.96	12.16	11.41	13.91	16.54	16.49	18.39	19.04	17.11
	<i>0.44</i>	<i>1.11</i>	<i>0.68</i>	<i>0.69</i>	<i>0.97</i>	<i>0.50</i>	<i>2.59</i>	<i>1.71</i>	<i>1.70</i>	<i>2.52</i>	<i>1.14</i>	<i>2.80</i>	<i>1.83</i>	<i>2.16</i>	<i>3.54</i>	<i>1.24</i>
(Very) Unsatisfied ⁶	4.77	7.92	4.42	4.65	4.48	4.85	4.12	3.87	2.91	3.92	3.69	8.50	3.93	2.45	3.87	4.50
	<i>0.24</i>	<i>0.84</i>	<i>0.31</i>	<i>0.33</i>	<i>0.51</i>	<i>0.23</i>	<i>0.94</i>	<i>1.03</i>	<i>0.76</i>	<i>1.60</i>	<i>0.56</i>	<i>2.49</i>	<i>0.93</i>	<i>0.90</i>	<i>2.33</i>	<i>0.84</i>
Cost of Care																
Cost																
Very Satisfied ⁵	17.00	13.23	19.83	17.04	13.49	17.71	13.31	10.06	8.65	8.59	10.40	11.48	16.00	17.45	14.46	15.35
	<i>0.44</i>	<i>1.00</i>	<i>0.72</i>	<i>0.56</i>	<i>0.87</i>	<i>0.49</i>	<i>2.70</i>	<i>1.31</i>	<i>1.43</i>	<i>1.91</i>	<i>0.97</i>	<i>2.15</i>	<i>2.59</i>	<i>2.17</i>	<i>3.62</i>	<i>1.61</i>
(Very) Unsatisfied ⁶	11.89	21.07	10.76	10.11	9.26	11.44	20.41	17.23	11.78	7.45	15.93	19.84	12.78	9.68	8.96	13.22
	<i>0.35</i>	<i>1.09</i>	<i>0.56</i>	<i>0.42</i>	<i>0.80</i>	<i>0.37</i>	<i>2.68</i>	<i>1.63</i>	<i>1.55</i>	<i>2.36</i>	<i>1.14</i>	<i>2.35</i>	<i>2.11</i>	<i>2.60</i>	<i>2.37</i>	<i>1.37</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 Total includes persons of other race/ethnicity and persons who did not report their race/ethnicity.
- 4 Column percentages do not sum to 100 percent because the responses of "satisfied" and "no experience" are excluded from the table for all satisfaction variables.
- 5 Beneficiaries who's response to the question was 'very satisfied'
- 6 Beneficiaries who's response to the question was 'unsatisfied' or 'very unsatisfied'

Table 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,257	1,021	4,326	4,201	1,748	11,296	1,907	11,529	5,515	791	19,742	1,530	2,169	1,682	831	6,213
	139.875	42	100	81	50	129	84	135	91	34	156	47	83	61	39	118
Beneficiaries as a Percent of Column Total																
Access to Care																
Usual Source of Care																
None ³	6.53	9.48	8.56	5.70	6.38	7.26	4.10	6.20	5.50	4.54	5.74	11.22	8.26	5.85	3.30	7.76
	0.30	1.46	1.01	0.55	0.76	0.50	0.74	0.42	0.53	1.09	0.32	1.36	0.98	1.00	0.84	0.60
Doctor's office	71.36	55.31	67.79	74.63	75.75	70.38	70.57	71.38	73.79	80.12	72.30	60.69	69.42	75.14	80.85	70.14
	1.05	3.02	1.65	1.75	1.89	1.44	1.99	1.34	1.28	2.14	1.12	2.03	1.96	1.56	1.80	1.10
Doctor's clinic	8.32	11.36	8.11	8.28	7.75	8.41	8.48	9.33	8.66	6.45	8.95	7.96	5.30	6.08	4.80	6.12
	0.91	1.91	1.13	1.59	1.43	1.26	1.38	1.03	1.01	1.82	0.96	1.04	0.89	0.98	0.91	0.61
HMO ⁴	7.00	1.89	7.88	6.70	5.76	6.58	5.96	8.40	7.50	5.59	7.81	2.88	6.60	5.54	4.40	5.12
	0.36	0.53	0.81	0.58	0.69	0.43	1.09	0.55	0.57	0.96	0.48	0.64	0.73	1.00	0.90	0.42
Hospital OPD/ER ⁵	2.78	9.06	3.34	2.02	2.26	3.21	3.46	1.69	1.48	0.36	1.76	7.41	5.85	3.77	2.85	5.32
	0.15	1.20	0.55	0.33	0.49	0.32	0.66	0.21	0.24	0.24	0.15	1.03	0.79	0.62	0.82	0.45
Other clinic/ health center	4.01	12.91	4.31	2.68	2.10	4.16	7.42	3.00	3.05	2.94	3.45	9.84	4.57	3.62	3.79	5.54
	0.22	2.53	0.51	0.44	0.48	0.37	1.19	0.35	0.29	0.68	0.25	1.08	1.05	0.67	0.84	0.58
Difficulty Obtaining Care																
Yes	3.63	11.25	3.39	2.62	2.24	3.63	8.68	2.73	2.08	1.34	3.07	10.98	3.91	3.55	2.86	5.41
	0.17	1.41	0.46	0.32	0.44	0.25	1.09	0.29	0.34	0.64	0.20	1.17	0.85	0.72	0.76	0.44
No	96.37	88.75	96.61	97.38	97.76	96.37	91.32	97.27	97.92	98.66	96.93	89.02	96.09	96.45	97.14	94.59
	0.17	1.41	0.46	0.32	0.44	0.25	1.09	0.29	0.34	0.64	0.20	1.17	0.85	0.72	0.76	0.44
Delayed Care Due to Cost																
Yes	7.59	26.58	7.78	5.16	3.99	7.91	22.33	4.91	4.02	1.90	6.22	22.22	10.37	6.41	3.72	11.33
	0.27	1.99	0.70	0.52	0.70	0.37	1.94	0.40	0.44	0.61	0.32	2.04	1.26	0.98	0.86	0.76
No	92.41	73.42	92.22	94.84	96.01	92.09	77.67	95.09	95.98	98.10	93.78	77.78	89.63	93.59	96.28	88.67
	0.27	1.99	0.70	0.52	0.70	0.37	1.94	0.40	0.44	0.61	0.32	2.04	1.26	0.98	0.86	0.76

Table 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,257	1,021	4,326	4,201	1,748	11,296	1,907	11,529	5,515	791	19,742	1,530	2,169	1,682	831	6,213
	<i>139.875</i>	<i>42</i>	<i>100</i>	<i>81</i>	<i>50</i>	<i>129</i>	<i>84</i>	<i>135</i>	<i>91</i>	<i>34</i>	<i>156</i>	<i>47</i>	<i>83</i>	<i>61</i>	<i>39</i>	<i>118</i>

Continuity of Care

Length of Association with Usual Source of Care																
No usual source ³	6.55	9.52	8.59	5.72	6.53	7.31	4.11	6.21	5.52	4.53	5.75	11.37	8.27	5.86	3.35	7.80
	<i>0.30</i>	<i>1.46</i>	<i>1.02</i>	<i>0.55</i>	<i>0.78</i>	<i>0.51</i>	<i>0.74</i>	<i>0.42</i>	<i>0.53</i>	<i>1.08</i>	<i>0.32</i>	<i>1.37</i>	<i>0.97</i>	<i>1.00</i>	<i>0.84</i>	<i>0.60</i>
Less than 1 year	9.74	11.79	11.48	10.12	8.76	10.60	10.05	9.34	7.63	8.80	8.92	9.20	11.62	10.42	12.77	10.83
	<i>0.35</i>	<i>1.58</i>	<i>0.80</i>	<i>0.77</i>	<i>0.78</i>	<i>0.48</i>	<i>1.23</i>	<i>0.70</i>	<i>0.54</i>	<i>1.21</i>	<i>0.45</i>	<i>1.26</i>	<i>1.56</i>	<i>1.14</i>	<i>1.56</i>	<i>0.77</i>
1 to less than 3 years	18.60	23.37	20.25	16.88	16.50	18.73	23.46	17.96	16.42	14.49	17.94	21.71	19.84	20.01	21.22	20.51
	<i>0.39</i>	<i>2.41</i>	<i>1.31</i>	<i>0.91</i>	<i>1.07</i>	<i>0.67</i>	<i>1.79</i>	<i>0.60</i>	<i>0.83</i>	<i>1.67</i>	<i>0.46</i>	<i>1.79</i>	<i>1.74</i>	<i>1.25</i>	<i>2.12</i>	<i>0.81</i>
3 to less than 5 years	16.02	17.97	15.04	16.76	14.77	15.91	18.76	16.49	14.91	13.66	16.17	18.21	13.99	16.39	14.41	15.74
	<i>0.33</i>	<i>1.78</i>	<i>0.94</i>	<i>0.98</i>	<i>1.08</i>	<i>0.60</i>	<i>1.65</i>	<i>0.65</i>	<i>0.74</i>	<i>1.67</i>	<i>0.45</i>	<i>1.29</i>	<i>1.48</i>	<i>1.32</i>	<i>1.75</i>	<i>0.79</i>
5 years or more	49.09	37.35	44.64	50.51	53.45	47.45	43.62	50.00	55.53	58.52	51.23	39.51	46.28	47.32	48.25	45.12
	<i>0.52</i>	<i>2.25</i>	<i>1.38</i>	<i>1.13</i>	<i>1.55</i>	<i>0.83</i>	<i>1.82</i>	<i>1.01</i>	<i>0.95</i>	<i>2.50</i>	<i>0.63</i>	<i>1.79</i>	<i>1.69</i>	<i>2.02</i>	<i>2.72</i>	<i>1.06</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 4 HMO stands for Health Maintenance Organization.
- 5 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,257	1,021	4,326	4,201	1,748	11,296	1,907	11,529	5,515	791	19,742	1,530	2,169	1,682	831	6,213
	139.875	42	100	81	50	129	84	135	91	34	156	47	83	61	39	118
Beneficiaries as a Percent of Column Total³																
Quality of Care																
General Care																
Very Satisfied ⁴	30.95	19.42	29.84	28.72	24.00	27.59	25.56	36.17	33.34	26.36	33.96	23.42	29.56	27.81	28.71	27.46
	0.46	1.70	1.39	1.11	1.39	0.73	1.59	0.92	1.07	2.18	0.70	1.54	2.30	1.71	1.97	1.13
(Very) Unsatisfied ⁵	3.61	7.03	4.21	3.21	3.64	4.00	5.99	2.78	2.95	4.53	3.21	6.56	3.66	3.14	3.17	4.17
	0.18	1.32	0.59	0.44	0.62	0.31	0.88	0.28	0.39	1.11	0.23	1.11	0.66	0.56	0.75	0.44
Follow-up Care																
Very Satisfied ⁴	18.35	13.12	18.06	17.56	12.44	16.59	17.73	21.10	18.84	13.88	19.87	16.21	17.53	16.61	15.10	16.67
	0.44	1.32	1.10	0.88	0.98	0.63	1.65	0.82	0.86	1.50	0.58	1.45	2.06	1.60	1.53	0.99
(Very) Unsatisfied ⁵	3.01	7.26	3.24	2.68	2.85	3.34	5.62	2.32	2.72	3.83	2.81	5.22	2.07	2.32	2.85	3.02
	0.16	1.53	0.49	0.37	0.56	0.29	0.93	0.23	0.31	0.99	0.19	0.81	0.53	0.62	0.74	0.34
Access/Coordination of Care																
Availability																
Very Satisfied ⁴	11.76	10.12	11.10	10.40	9.17	10.46	11.39	12.90	11.38	14.90	12.41	11.79	11.14	12.30	14.63	12.04
	0.40	1.19	0.84	0.69	1.00	0.49	1.44	0.77	0.66	1.94	0.57	1.13	1.69	1.29	1.75	0.75
(Very) Unsatisfied ⁵	3.06	5.97	2.67	2.49	2.66	2.90	7.35	2.48	2.57	2.96	3.00	6.67	2.56	2.43	2.51	3.55
	0.18	0.97	0.42	0.38	0.50	0.26	1.30	0.30	0.36	0.82	0.28	0.98	0.56	0.51	0.66	0.42
Ease of Access to Doctor																
Very Satisfied ⁴	19.62	11.82	19.34	17.26	13.65	17.04	12.83	24.78	20.90	15.54	22.18	14.15	19.98	13.75	13.97	16.10
	0.48	1.39	1.12	0.94	1.09	0.72	1.26	0.81	0.87	1.59	0.59	1.27	2.08	1.40	1.53	0.94
(Very) Unsatisfied ⁵	5.37	12.98	5.02	5.98	7.18	6.41	9.82	2.54	4.21	6.59	3.87	11.34	7.72	6.76	7.36	8.32
	0.23	1.59	0.74	0.58	0.83	0.42	1.16	0.32	0.45	1.11	0.27	1.44	1.24	0.91	1.11	0.67
Can Obtain Care in Same Location																
Very Satisfied ⁴	15.00	13.04	14.30	15.48	10.61	14.07	14.21	17.26	14.75	10.49	16.01	12.84	15.00	12.29	12.64	13.45
	0.47	1.77	0.98	0.94	1.04	0.61	1.60	0.72	0.70	1.33	0.58	1.35	1.87	1.33	1.57	0.90
(Very) Unsatisfied ⁵	4.66	9.02	4.01	3.99	4.07	4.47	10.64	4.08	3.78	4.44	4.65	8.80	3.45	3.99	4.42	5.05
	0.23	1.22	0.58	0.47	0.68	0.35	1.49	0.38	0.34	0.95	0.30	1.17	0.65	0.75	1.11	0.47

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,257	1,021	4,326	4,201	1,748	11,296	1,907	11,529	5,515	791	19,742	1,530	2,169	1,682	831	6,213
	<i>139.875</i>	<i>42</i>	<i>100</i>	<i>81</i>	<i>50</i>	<i>129</i>	<i>84</i>	<i>135</i>	<i>91</i>	<i>34</i>	<i>156</i>	<i>47</i>	<i>83</i>	<i>61</i>	<i>39</i>	<i>118</i>
Beneficiaries as a Percent of Column Total³																
Relationship with Primary Doctor																
Information from Doctor																
Very Satisfied ⁴	19.08	12.95	19.36	16.98	14.07	17.11	15.95	22.05	19.77	15.28	20.56	15.90	18.44	17.10	22.21	17.91
	<i>0.43</i>	<i>1.51</i>	<i>1.14</i>	<i>0.85</i>	<i>1.19</i>	<i>0.59</i>	<i>1.48</i>	<i>0.74</i>	<i>0.92</i>	<i>1.83</i>	<i>0.54</i>	<i>1.42</i>	<i>2.03</i>	<i>1.50</i>	<i>1.95</i>	<i>0.98</i>
(Very) Unsatisfied ⁵	5.24	10.21	5.59	4.62	5.39	5.62	9.41	4.22	4.98	6.95	5.04	7.28	4.74	4.75	3.55	5.23
	<i>0.22</i>	<i>1.64</i>	<i>0.63</i>	<i>0.47</i>	<i>0.82</i>	<i>0.34</i>	<i>1.24</i>	<i>0.36</i>	<i>0.43</i>	<i>1.33</i>	<i>0.29</i>	<i>1.09</i>	<i>0.88</i>	<i>0.79</i>	<i>0.80</i>	<i>0.43</i>
Doctor's Concern for Overall Health																
Very Satisfied ⁴	20.06	13.56	19.77	18.39	14.16	17.86	20.44	22.99	20.55	15.38	21.78	15.94	20.43	18.65	18.10	18.55
	<i>0.44</i>	<i>1.27</i>	<i>1.18</i>	<i>0.95</i>	<i>1.11</i>	<i>0.65</i>	<i>1.98</i>	<i>0.74</i>	<i>0.93</i>	<i>1.71</i>	<i>0.58</i>	<i>1.40</i>	<i>2.14</i>	<i>1.56</i>	<i>1.79</i>	<i>1.03</i>
(Very) Unsatisfied ⁵	4.77	7.82	5.32	4.11	4.44	4.97	6.96	4.09	4.60	5.81	4.58	7.61	4.61	4.35	2.51	5.05
	<i>0.24</i>	<i>1.10</i>	<i>0.75</i>	<i>0.49</i>	<i>0.72</i>	<i>0.37</i>	<i>0.94</i>	<i>0.38</i>	<i>0.47</i>	<i>1.27</i>	<i>0.30</i>	<i>1.16</i>	<i>0.64</i>	<i>0.68</i>	<i>0.67</i>	<i>0.45</i>
Cost of Care																
Cost																
Very Satisfied ⁴	17.00	12.65	17.38	15.64	12.22	15.54	11.77	20.01	17.68	13.55	18.31	14.36	16.20	15.55	15.36	15.46
	<i>0.44</i>	<i>1.74</i>	<i>0.97</i>	<i>0.71</i>	<i>1.11</i>	<i>0.54</i>	<i>1.35</i>	<i>0.82</i>	<i>0.81</i>	<i>1.57</i>	<i>0.58</i>	<i>1.32</i>	<i>1.70</i>	<i>1.33</i>	<i>1.72</i>	<i>0.78</i>
(Very) Unsatisfied ⁵	11.89	22.71	10.92	10.41	8.68	11.45	21.93	10.69	9.74	10.60	11.51	18.68	14.97	10.58	8.63	13.92
	<i>0.35</i>	<i>2.08</i>	<i>0.89</i>	<i>0.63</i>	<i>0.97</i>	<i>0.49</i>	<i>1.36</i>	<i>0.59</i>	<i>0.58</i>	<i>1.51</i>	<i>0.43</i>	<i>1.65</i>	<i>1.38</i>	<i>1.18</i>	<i>1.39</i>	<i>0.87</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 Column percentages do not sum to 100 percent because the responses to "satisfied" and "no experience" are excluded from the table for all satisfaction variables.
- 4 Beneficiaries who's response to the question was 'very satisfied'
- 5 Beneficiaries who's response to the question was 'unsatisfied' or 'very unsatisfied'

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,257	15,677	19,971	11,566	10,323	2,608	7,835
	140	176	180	154	144	77	137
Beneficiaries as a Percent of Column Total							
Access to Care							
Usual Source of Care							
None ⁶	6.53	8.78	7.51	9.04	4.88	3.38	3.62
	0.30	0.53	0.42	0.62	0.46	0.60	0.38
Doctor's office	71.36	70.34	70.89	70.04	71.67	69.92	72.79
	1.05	1.28	1.24	1.41	1.26	2.16	1.33
Doctor's clinic	8.32	7.93	8.29	7.99	8.37	9.20	8.68
	0.91	0.90	1.02	1.00	0.98	1.97	1.12
HMO ⁷	7.00	8.29	7.59	8.36	4.86	4.94	4.84
	0.36	0.48	0.44	0.55	0.41	0.74	0.39
Hospital OPD/ER ⁸	2.78	1.90	2.52	2.01	4.17	4.53	3.74
	0.15	0.18	0.21	0.22	0.41	0.81	0.35
Other clinic/health center	4.01	2.77	3.21	2.57	6.05	8.03	6.33
	0.22	0.25	0.26	0.30	0.44	0.93	0.53
Difficulty Obtaining Care							
Yes	3.63	1.91	1.91	1.65	6.92	11.17	7.44
	0.17	0.21	0.20	0.24	0.43	1.00	0.54
No	96.37	98.09	98.09	98.35	93.08	88.83	92.56
	0.17	0.21	0.20	0.24	0.43	1.00	0.54
Delayed Care Due to Cost							
Yes	7.59	3.75	4.32	3.18	14.26	12.99	14.10
	0.27	0.27	0.26	0.29	0.68	1.24	0.66
No	92.41	96.25	95.68	96.82	85.74	87.01	85.90
	0.27	0.27	0.26	0.29	0.68	1.24	0.66

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,257	15,677	19,971	11,566	10,323	2,608	7,835
	<i>140</i>	<i>176</i>	<i>180</i>	<i>154</i>	<i>144</i>	<i>77</i>	<i>137</i>

Beneficiaries as a Percent of Column Total

Continuity of Care							
Length of Association with Usual Source of Care							
No usual source ⁶	6.55	8.80	7.53	9.05	4.89	3.39	3.62
	<i>0.30</i>	<i>0.53</i>	<i>0.42</i>	<i>0.62</i>	<i>0.46</i>	<i>0.60</i>	<i>0.38</i>
Less than 1 year	9.74	9.00	9.38	9.10	11.01	11.05	11.18
	<i>0.35</i>	<i>0.41</i>	<i>0.47</i>	<i>0.51</i>	<i>0.56</i>	<i>1.09</i>	<i>0.68</i>
1 to less than 3 years	18.60	17.46	17.88	17.30	19.40	20.95	18.91
	<i>0.39</i>	<i>0.49</i>	<i>0.45</i>	<i>0.58</i>	<i>0.72</i>	<i>1.19</i>	<i>0.87</i>
3 to less than 5 years	16.02	15.20	15.31	15.09	17.41	16.01	17.58
	<i>0.33</i>	<i>0.46</i>	<i>0.42</i>	<i>0.59</i>	<i>0.68</i>	<i>1.09</i>	<i>0.70</i>
5 years or more	49.09	49.54	49.90	49.47	47.29	48.61	48.71
	<i>0.52</i>	<i>0.72</i>	<i>0.69</i>	<i>0.88</i>	<i>0.86</i>	<i>1.83</i>	<i>1.07</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 "Indicators of Good Health" and "Indicators of Poor Health" do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.
- 4 "No Functional Limitations" means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs). See Appendix B for definitions of IADL and ADL.
- 5 ADL stands for Activity of Daily Living.
- 6 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 7 HMO stands for Health Maintenance Organization.
- 8 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,257	15,677	19,971	11,566	10,323	2,608	7,835
	140	176	180	154	144	77	137
Beneficiaries as a Percent of Column Total⁶							
Quality of Care							
General Care							
Very Satisfied ⁷	30.95	38.10	32.62	37.67	23.95	27.54	24.86
	0.46	0.77	0.65	0.93	0.78	1.40	0.89
(Very) Unsatisfied ⁸	3.61	2.25	2.61	2.07	6.31	7.83	6.83
	0.18	0.25	0.21	0.27	0.39	0.80	0.45
Follow-up Care							
Very Satisfied ⁷	18.35	21.71	18.62	21.25	15.13	16.57	16.19
	0.44	0.68	0.59	0.72	0.74	1.18	0.79
(Very) Unsatisfied ⁸	3.01	1.60	1.80	1.21	5.55	8.08	6.04
	0.16	0.20	0.16	0.16	0.39	0.97	0.50
Access/Coordination of Care							
Availability							
Very Satisfied ⁷	11.76	12.62	11.77	12.74	11.76	13.22	12.58
	0.40	0.58	0.54	0.68	0.60	1.07	0.71
(Very) Unsatisfied ⁸	3.06	1.99	2.00	1.53	4.97	6.08	5.56
	0.18	0.22	0.18	0.21	0.40	0.67	0.47
Ease of Access to Doctor							
Very Satisfied ⁷	19.62	25.24	22.76	26.54	13.24	12.41	13.32
	0.48	0.71	0.66	0.84	0.66	1.22	0.69
(Very) Unsatisfied ⁸	5.37	2.92	2.46	2.02	9.99	14.49	11.40
	0.23	0.27	0.22	0.28	0.62	1.10	0.73
Can Obtain Care in Same Location							
Very Satisfied ⁷	15.00	18.36	16.29	18.76	12.00	13.84	12.51
	0.47	0.66	0.66	0.77	0.78	1.19	0.81
(Very) Unsatisfied ⁸	4.66	3.32	3.14	2.76	7.46	8.25	8.10
	0.23	0.25	0.26	0.33	0.50	0.91	0.62

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,257	15,677	19,971	11,566	10,323	2,608	7,835
	<i>140</i>	<i>176</i>	<i>180</i>	<i>154</i>	<i>144</i>	<i>77</i>	<i>137</i>
Beneficiaries as a Percent of Column Total⁶							
Relationship with Primary Doctor							
Information from Doctor							
Very Satisfied ⁷	19.08	22.76	20.03	23.30	15.95	17.33	16.74
	<i>0.43</i>	<i>0.67</i>	<i>0.61</i>	<i>0.80</i>	<i>0.73</i>	<i>1.19</i>	<i>0.80</i>
(Very) Unsatisfied ⁸	5.24	3.23	3.52	2.93	8.76	11.24	9.55
	<i>0.22</i>	<i>0.28</i>	<i>0.25</i>	<i>0.32</i>	<i>0.45</i>	<i>1.18</i>	<i>0.51</i>
Doctor's Concern for Overall Health							
Very Satisfied ⁷	20.06	24.08	20.42	23.75	16.33	18.09	17.31
	<i>0.44</i>	<i>0.63</i>	<i>0.60</i>	<i>0.70</i>	<i>0.77</i>	<i>1.22</i>	<i>0.80</i>
(Very) Unsatisfied ⁸	4.77	3.13	3.52	2.88	7.68	9.37	8.23
	<i>0.24</i>	<i>0.26</i>	<i>0.24</i>	<i>0.31</i>	<i>0.43</i>	<i>0.93</i>	<i>0.50</i>
Cost of Care							
Cost							
Very Satisfied ⁷	17.00	20.90	18.62	21.42	12.33	12.07	12.62
	<i>0.44</i>	<i>0.71</i>	<i>0.62</i>	<i>0.85</i>	<i>0.65</i>	<i>1.12</i>	<i>0.70</i>
(Very) Unsatisfied ⁸	11.89	8.27	8.47	7.82	18.22	22.12	19.87
	<i>0.35</i>	<i>0.46</i>	<i>0.43</i>	<i>0.52</i>	<i>0.71</i>	<i>1.27</i>	<i>0.82</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview.

It excludes beneficiaries who resided in a long-term care facility at the time of their interview.

2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).

3 "Indicators of Good Health" and "Indicators of Poor Health" do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.

4 "No Functional Limitations" means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs).

See Appendix B for definitions of IADL and ADL.

5 ADL stands for Activity of Daily Living.

6 Column percentages do not sum to 100 percent because the responses for "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

7 Beneficiaries who's response to the question was 'very satisfied'

8 Beneficiaries who's response to the question was 'unsatisfied' or 'very unsatisfied'

Table 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total	Medicare Risk HMO	Supplemental Health Insurance				Medicare Fee-For-Service HMO	Other
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance		
Beneficiaries (in 000s)	37,257	5,165	5,032	9,295	11,376	1,471	4,392	526
	140	115	120	172	178	72	113	47
Beneficiaries as a Percent of Column Total								
Access to Care								
Usual Source of Care								
None ³	6.53	2.43	8.25	6.73	5.26	4.06	13.63	5.24
	0.30	0.29	0.84	0.51	0.39	0.84	1.02	1.03
Doctor's office	71.36	52.65	68.04	78.78	80.40	81.09	54.95	65.64
	1.05	1.56	1.39	2.25	1.12	1.97	1.29	3.82
Doctor's clinic	8.32	4.43	7.78	10.45	8.30	10.90	8.21	8.04
	0.91	0.39	0.84	2.28	0.85	1.53	0.84	1.74
HMO ⁴	7.00	37.08	0.96	0.78	2.25	0.30	5.69	1.27
	0.36	1.45	0.37	0.21	0.36	0.24	0.85	0.76
Hospital OPD/ER ⁵	2.78	1.51	8.79	1.32	1.53	1.30	4.51	8.43
	0.15	0.26	0.72	0.24	0.19	0.57	0.56	2.26
Other clinic/health center	4.01	1.90	6.17	1.95	2.26	2.34	13.00	11.38
	0.22	0.34	0.57	0.29	0.29	0.67	0.94	2.25
Difficulty Obtaining Care								
Yes	3.63	4.82	6.67	1.90	1.90	1.62	7.52	4.20
	0.17	0.44	0.65	0.23	0.24	0.47	0.60	1.34
No	96.37	95.18	93.33	98.10	98.10	98.38	92.48	95.80
	0.17	0.44	0.65	0.23	0.24	0.47	0.60	1.34
Delayed Care Due to Cost								
Yes	7.59	3.88	12.19	5.02	4.31	2.53	21.21	16.83
	0.27	0.44	0.78	0.30	0.43	0.65	1.12	2.59
No	92.41	96.12	87.81	94.98	95.69	97.47	78.79	83.17
	0.27	0.44	0.78	0.30	0.43	0.65	1.12	2.59

Table 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1997

Community-Only Residents¹

Indicator of Access to Care ²	Total	Medicare Risk HMO	Supplemental Health Insurance			Both Types of Private Insurance	Medicare Fee-For-Service HMO	Other
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance			
Beneficiaries (in 000s)	37,257	5,165	5,032	9,295	11,376	1,471	4,392	526
	<i>140</i>	<i>115</i>	<i>120</i>	<i>172</i>	<i>178</i>	<i>72</i>	<i>113</i>	<i>47</i>
Beneficiaries as a Percent of Column Total								
Continuity of Care								
Length of Association with Usual Source of Care								
No usual source ³	6.55	2.44	8.23	6.77	5.28	4.08	13.69	5.29
	<i>0.30</i>	<i>0.29</i>	<i>0.85</i>	<i>0.52</i>	<i>0.39</i>	<i>0.85</i>	<i>1.03</i>	<i>1.04</i>
Less than 1 year	9.74	19.93	11.36	6.28	7.83	6.19	9.61	8.83
	<i>0.35</i>	<i>0.90</i>	<i>0.96</i>	<i>0.45</i>	<i>0.56</i>	<i>1.39</i>	<i>0.68</i>	<i>1.76</i>
1 to less than 3 years	18.60	28.79	21.54	15.80	15.52	16.33	17.35	26.18
	<i>0.39</i>	<i>0.86</i>	<i>1.01</i>	<i>0.67</i>	<i>0.54</i>	<i>1.64</i>	<i>1.01</i>	<i>3.30</i>
3 to less than 5 years	16.02	17.22	16.94	14.94	15.94	15.05	16.30	17.65
	<i>0.33</i>	<i>0.83</i>	<i>0.96</i>	<i>0.58</i>	<i>0.59</i>	<i>1.36</i>	<i>0.93</i>	<i>2.74</i>
5 years or more	49.09	31.62	41.93	56.21	55.44	58.34	43.04	42.05
	<i>0.52</i>	<i>1.15</i>	<i>1.18</i>	<i>0.87</i>	<i>0.88</i>	<i>2.31</i>	<i>1.41</i>	<i>3.33</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 4 HMO stands for Health Maintenance Organization.
- 5 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total	Medicare Risk HMO	Supplemental Health Insurance			Medicare Fee-For Service Only	Other
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance		
Beneficiaries (in 000s)	37,257	5,165	5,032	9,295	11,376	1,471	4,392
	140	115	120	172	178	72	113
Beneficiaries as a Percent of Column Total⁴							
Quality of Care							
General Care							
Very Satisfied ⁵	30.95	32.18	24.52	32.05	34.70	38.79	22.91
	0.46	1.12	1.19	0.95	0.80	2.38	1.03
(Very) Unsatisfied ⁶	3.61	5.34	4.12	2.67	2.74	3.07	5.41
	0.18	0.51	0.46	0.26	0.26	0.87	0.57
Follow-up Care							
Very Satisfied ⁵	18.35	20.71	15.19	17.48	20.78	22.82	12.89
	0.44	1.04	1.08	0.74	0.76	1.82	0.98
(Very) Unsatisfied ⁶	3.01	3.98	3.78	2.26	2.52	1.68	4.18
	0.16	0.51	0.43	0.23	0.27	0.58	0.53
Access/Coordination of Care							
Availability							
Very Satisfied ⁵	11.76	12.20	13.82	11.42	11.48	12.94	10.12
	0.40	0.70	0.95	0.67	0.71	1.46	0.82
(Very) Unsatisfied ⁶	3.06	3.35	4.30	2.48	2.44	3.35	4.10
	0.18	0.36	0.53	0.24	0.28	0.63	0.63
Ease of Access to Doctor							
Very Satisfied ⁵	19.62	23.36	12.84	19.85	22.35	27.11	12.78
	0.48	0.82	1.05	0.86	0.90	2.03	0.88
(Very) Unsatisfied ⁶	5.37	4.92	9.28	4.36	3.47	3.63	9.40
	0.23	0.47	0.77	0.46	0.29	0.87	0.76
Can Obtain Care in Same Location							
Very Satisfied ⁵	15.00	21.16	13.32	13.10	15.11	16.03	13.06
	0.47	1.01	0.94	0.77	0.87	1.77	0.92
(Very) Unsatisfied ⁶	4.66	4.13	4.52	4.24	4.37	4.83	6.56
	0.23	0.51	0.48	0.44	0.38	1.10	0.73

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1997

Community-Only Residents¹

Measure of Satisfaction ²	Total	Medicare Risk HMO	Supplemental Health Insurance				Medicare Fee-For Service Only	Other
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance		
Beneficiaries (in 000s)	37,257	5,165	5,032	9,295	11,376	1,471	4,392	526
	<i>140</i>	<i>115</i>	<i>120</i>	<i>172</i>	<i>178</i>	<i>72</i>	<i>113</i>	<i>47</i>
Relationship with Primary Doctor								
Information from Doctor								
Very Satisfied ⁵	19.08	21.92	20.77	17.31	20.08	21.01	14.78	15.72
	<i>0.43</i>	<i>0.97</i>	<i>1.23</i>	<i>0.69</i>	<i>0.89</i>	<i>1.75</i>	<i>0.94</i>	<i>2.08</i>
(Very) Unsatisfied ⁶	5.24	5.41	5.69	4.81	4.93	4.72	6.43	5.86
	<i>0.22</i>	<i>0.47</i>	<i>0.68</i>	<i>0.39</i>	<i>0.40</i>	<i>1.00</i>	<i>0.62</i>	<i>1.76</i>
Doctor's Concern for Overall Health								
Very Satisfied ⁵	20.06	24.62	15.55	19.33	21.63	24.99	15.21	17.44
	<i>0.44</i>	<i>1.07</i>	<i>1.11</i>	<i>0.76</i>	<i>0.89</i>	<i>1.72</i>	<i>0.92</i>	<i>2.24</i>
(Very) Unsatisfied ⁶	4.77	5.79	5.34	4.31	4.09	3.95	6.06	4.53
	<i>0.24</i>	<i>0.53</i>	<i>0.56</i>	<i>0.38</i>	<i>0.38</i>	<i>0.89</i>	<i>0.74</i>	<i>1.46</i>
Cost of Care								
Cost								
Very Satisfied ⁵	17.00	27.47	17.00	13.97	17.47	17.04	10.29	12.28
	<i>0.44</i>	<i>1.11</i>	<i>1.12</i>	<i>0.64</i>	<i>0.70</i>	<i>1.72</i>	<i>0.88</i>	<i>2.07</i>
(Very) Unsatisfied ⁶	11.89	5.66	10.21	14.15	9.16	10.06	23.58	15.83
	<i>0.35</i>	<i>0.51</i>	<i>0.78</i>	<i>0.73</i>	<i>0.46</i>	<i>1.38</i>	<i>1.25</i>	<i>2.37</i>

Source: Medicare Current Beneficiary Survey

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.
- 2 Responses for sample persons not interviewed in Round 7 (i.e., the 1993 Access to Care Public Use File) were taken from their Round 4 interview (i.e., the 1992 Access to Care Public Use File) or from their Round 10 interview (i.e., the 1994 Access to Care Public Use File).
- 3 HMO stands for Health Maintenance Organization.
- 4 Column percentages do not sum to 100 percent because the responses to "satisfied" and "no experience" are excluded from the table for all satisfaction variables.
- 5 Beneficiaries who's response to the question was 'very satisfied'
- 6 Beneficiaries who's response to the question was 'unsatisfied' or "very unsatisfied"